



TRANSMITTAL FORM		(to be used for all correspondence after initial filing)	
Application No.		10/613,328	
Filing Date		July 2, 2003	
First Named Inventor		Michael V. PAUKSHTO	
Examiner Name		NGUYEN, THANH NHAN P	
Group Art Unit		2871	
Total Number of Pages in This Submission		9	Attorney Docket No.
		A-72195/MSS/TJH (477077-102)	
ENCLOSURES (check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form		<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached		<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply		<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final		<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)		<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request		<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request		<input type="checkbox"/> Terminal Disclaimer	Return Post Card
<input type="checkbox"/> Information Disclosure Statement		<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)		<input type="checkbox"/> CD, No. of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual name	Tianjun Hou, Reg. No. 51,821 DORSEY & WHITNEY LLP 555 California Street, Suite 1000 San Francisco, CA 94104-1513 Telephone : (650) 857-1717		Customer Number 32940
Signature			
Date	May 23, 2006		
CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with Sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:			05/23/06
Typed or printed name	Vikki Athen		
Signature		Date	May 23, 2006



**AMENDMENT
FEE CALCULATION
(FY 2005)**

Complete if Known

Application No.	10/613,328
Filing Date	July 2, 2003
First Named Inventor	Michael V. PAUKSHTO
Group Art Unit	2871
Examiner Name	Nguyen, Thanh Nan P.
Atty. Docket Number	A-72195 (477077-102)

Claims as Amended in Response to Office Action dated: January 24, 2006

METHOD OF PAYMENT (Check One)		AMENDMENT FEE CALCULATION (Continued)			
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account No.: 50-2319 Deposit Account Name: DORSEY & WHITNEY LLP <input checked="" type="checkbox"/> Charge any additional fee required under 37 C.F.R. 1.16 and 1.17 <input checked="" type="checkbox"/> Applicant claims small entity status (see 37 C.F.R. 1.27)		3. ADDITIONAL FEES			
2. <input checked="" type="checkbox"/> Check Enclosed		Large Entity Fee	Small Entity Fee	Fee Description	Fee Paid
		120	60	Extension for reply within first month	\$ 60
		450	225	Extension for reply within second month	
		1,020	510	Extension for reply within third month	
		1,590	795	Extension for reply within fourth month	
		2,160	1,080	Extension for reply within fifth month	
		500	250	Notice of Appeal	
		500	250	Filing a brief in support of an appeal	
		1,000	500	Request for oral hearing	
		130	65	Terminal Disclaimer Fee	
		500	250	Petition to revive – unavoidable	
		1,500	750	Petition to revive – unintentional	
		790	395	Utility/Reissue issue fee (inc. 10 advance copies)	
		130	130	Petitions to the Commissioner	
		180	180	Submission of IDS	
		790	395	Request for Continued Examination (RCE)	
		Other fee (specify):			
		Subtotal (2)			\$
		Total Amount of Payment:			\$ 60

1. EXTRA* CLAIM FEES				
Claims Remaining after Amendment	Highest Number Previously Paid for	Present Extra	Fee from Below*	Additional Fee
Total 22	22	= 0	x	=
Indep. 1	3	= 0	x	=
First Presentation of Multiple Dependent Claim			x	=
Subtotal (1)				

*Calculation of Extra Claim Fees

Large Entity Fee	Small Entity Fee	Fee Description
50	25	Claims in excess of 20
200	100	Independent claims in excess of 3
360	180	Multiple dependent Claim
200	100	Reissue independent claims over original patent
50	25	Reissue claims in excess of 20 and over original patent

Submitted by:

Name: Tianjun Hou	Reg. No.: 51,821	Telephone: 650-857-1717
DORSEY & WHITNEY LLP	555 California Street, Suite 1000 San Francisco, California 94104-1513	CUSTOMER NUMBER 32940
Signature:		Date: May 23, 2006